

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL023004</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>01/03/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>ADVENTURE HOUSE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>924 N. LAFAYETTE STREET SHELBY, NC 28150</b>		
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint survey was completed on 1/3/24. The complaint was unsubstantiated (#NC00209939). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1200 Psychosocial Rehabilitation Facilities for Individuals with Severe and Persistent Mental Illness.</p> <p>This facility is licensed for 0 and currently has a census of 81. The survey sample consisted of audits of 5 current clients.</p>	V 000		
V 108	<p><b>27G .0202 (F-I) Personnel Requirements</b></p> <p><b>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</b></p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <p>(1) general organizational orientation;</p> <p>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</p> <p>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</p> <p>(4) training in infectious diseases and bloodborne pathogens.</p> <p>(h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross,</p>	V 108		

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**MAR 07 2024**  
**DHSR-MH Licensure Sect**

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6899

2IRZ11

*Executive Director* **2/19/24**

If continuation sheet 1 of 8

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V 108	<p>Continued From page 1</p> <p>the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating, and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure 3 of 3 audited staff (Staff #1, #2, #3) were trained to meet the mh/dd/sa needs of the clients. The findings are:</p> <p>Record review on 12/29/23 for Client #1 revealed: Date of admission: 11/16/22 Diagnosis: Adjustment Disorder with mixed anxiety and depressed mood.</p> <p>Record review on 12/29/23 for Client #2 revealed: Date of admission: 11/27/17 Diagnoses: Schizoaffective Disorder, Bipolar Disorder.</p> <p>Record review on 12/29/23 for Client #3 revealed: Date of admission: 3/15/22 Diagnoses: Paranoid Schizophrenia, Attention Deficit Hyperactivity Disorder.</p> <p>Record review on 12/29/23 for Client #4 revealed: Date of admission: 8/23/22 Diagnosis: Depression.</p> <p>Record review on 12/29/23 for Client #5 revealed: Date of admission: 10/21/19</p>	V 108	<p>To correct 27G .0202 (F-I) Personnel Requirements, we have added appropriate trainings to the initial/annual training specifically for mental health, developmental disabilities and substance abuse through the Relias Training Course which are to be completed by 05/31/24. Some courses added include:</p> <p>Schizophrenia Spectrum and Other Psychotic Disorders for Paraprofessionals Symptoms, Etiology, and Recovery-Focused Interventions for Schizophrenia SMI: Bipolar and Depressive Disorders in Adults for Paraprofessionals An Overview of Bipolar and Related Disorders An Overview of Substance Use Disorders Overview of Co-Occurring Disorders for Paraprofessionals Working with Individuals with Alcohol Use Disorder Overcoming Barriers to LGBTQ+ Affirming Behavioral Health Services Building Relationships and Community for People with IDD</p>	

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V 108	<p>Continued From page 2</p> <p>Diagnoses: Major Depressive Disorder, Alcohol Dependence.</p> <p>Record review on 1/3/24 for Staff #1 revealed: -Date of hire- 7/1/23 as Rehabilitation Specialist (paraprofessional) -There was no documentation of training in mental health, developmental disability/substance abuse.</p> <p>Record review on 1/3/24 for Staff #2 revealed: -Date of hire-11/1/05 as Senior Rehabilitation Specialist (Qualified Professional). -There was no documentation of training in mental health, developmental disability/substance abuse.</p> <p>Record review on 1/3/24 for Staff #3 revealed: -Date of hire- 7/17/06 as Rehabilitation Specialist (paraprofessional) -There was no documentation of training in mental health, developmental disability/substance abuse.</p> <p>Interview on 1/3/24 with Staff #1 revealed: -Had a lot of online trainings but did not recall specific trainings on mental health or substance abuse.</p> <p>Interview on 1/3/24 with the Executive Director revealed: -Was not aware staff did not have trainings in mh/dd/sa as she had only been ED since February 2023. -Had added trainings related to suicide and medication management she thought would be useful for staff.</p>	V 108		

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V 536	<p>27E .0107 Client Rights - Training on Alt to Rest. Int.</p> <p>10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS</p> <p>(a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions.</p> <p>(b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <p>(1) knowledge and understanding of the people being served;</p>	V 536		

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V 536	Continued From page 4  (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior; (8) communication strategies for defusing and de-escalating potentially dangerous behavior; and (9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe). (h) Service providers shall maintain documentation of initial and refresher training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where they attended; and (C) instructor's name; (2) The Division of MH/DD/SAS may review/request this documentation at any time. (i) Instructor Qualifications and Training Requirements: (1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions. (2) Trainers shall demonstrate competence	V 536		



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V 536	<p>Continued From page 5</p> <p>by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p>	V 536		

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V 536	<p>Continued From page 6</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on personnel record reviews and staff interviews, the facility failed to ensure that all staff completed training in alternatives to restrictive intervention annually for 3 of 3 audited staff (Staff #1, #2 and #3). The findings are:</p> <p>Record review on 1/3/24 for Staff #1 revealed: -Date of hire- 7/1/23 as Rehabilitation Specialist (paraprofessional) -There was documentation of only 1 online training in "strategies for de-escalating hostile situations" not the entire group of approved trainings through Relias.</p> <p>Record review on 1/3/24 for Staff #2 revealed: -Date of hire-11/1/05 as Senior Rehabilitation Specialist (Qualified Professional). -There was documentation of only 1 online</p>	V 536	<p>To correct 10A NCAC 27E .0107 Training on Alternatives to restrictive interventions we added to our Relias Trainings: Crisis Management Basics for Paraprofessionals Preventing and De-escalating Crisis Situations Recognizing and Responding to a Person in Crisis Verbal De-escalation Strategies Verbal De-escalation Practice Use of Crisis Intervention Techniques All these trainings equal 4.91 hours of training. These trainings will be due on 05/31/24.</p>	



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V 536	<p>Continued From page 7</p> <p>training in "strategies for de-escalating hostile situations" not the entire group of approved trainings through Relias.</p> <p>Record review on 1/3/24 for Staff #3 revealed: -Date of hire- 7/17/06 as Rehabilitation Specialist (paraprofessional) -There was documentation of only 1 online training in "strategies for de-escalating hostile situations" not the entire group of approved trainings through Relias.</p> <p>Interview on 1/3/24 with the Executive Director revealed: -Would make sure all staff were assigned the required trainings for de-escalation.</p>	V 536		